

**APPLICATION FOR MEMBERSHIP
ON THE CRIMINAL JUSTICE ACT FELONY PANEL
FOR THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF MARYLAND**

The following Application is to be completed by attorneys requesting to represent defendants under the provisions of the Criminal Justice Act in the United States District Court for the District of Maryland in felony cases. The Application is to be printed or typed.*

1. Name: _____

Office Address: _____

Office Phone: _____

E-Mail Address: _____

Maryland U.S. District Court No. _____

Social Security No. _____

* The CJA payment system **REQUIRES** a Social Security No. for all attorneys for identification purposes. The number will not appear on your voucher and will remain confidential.

INCOME MUST BE CREDITED TO:

Social Security No. _____ - **OR** - Employer Identification No. _____
please provide

C The application should be sent to:

**Donna P. Shearer, Esq.
CJA Supervising Atty.
101 W. Lombard Street
Room 8-A
Baltimore, Md 21201**

Felony Panel

2. Education and Bar Admissions:

Graduated from _____ Law School
on: _____.

Admitted to practice in (please list jurisdiction of first admission)
_____ on _____.

Admitted to practice in the United States District Court for the District of Maryland
on _____

Admitted to practice in the United States Court of Appeals for the Fourth Circuit on

Other Admissions:

Jurisdiction

Location

Date

3. Disciplinary Actions:

Have you ever been disciplined (or are you the subject of any pending disciplinary action) by the Bar of any jurisdiction or by any Court? _____ If so, please explain on a separate sheet of paper bearing your name and address, what the discipline was and the nature of the conduct that led to the disciplinary action.

4. Practice Background:

Have you ever been employed as a full-time prosecutor, public defender, or law clerk to a judge? If so, please indicate the position, the name of the office or judge, and give dates of employment:

Have you at any time been a member of the CJA panel for this court? If so, dates:

Have you at any time been a member of the CJA panel for any other court? If so, courts and dates: _____

List any Continuing Legal Education experience, either as a participant or lecturer, in criminal or trial advocacy programs, indicating whether the programs included a component on the federal Sentencing Guidelines:

5. Trial and Appellate Experience:

How many felony cases have you tried to verdict within the past five years:

United States District Court _____

Maryland Circuit Courts _____

Others (name court) _____

If you do not believe that the answer to the previous question adequately reflects your trial experience, approximately how many felony cases did you try to verdict prior to the past five years?

United States District Court _____

Maryland Circuit Courts _____

Others (name court) _____

How many post-Guidelines sentencings have you handled in federal felony cases?

How many appeals in federal felony cases have you handled within the past five years?

Approximately how many civil jury cases have you tried to verdict?

6. **Please provide on Exhibit A attached the following information as to five felony cases: (a) defendant's last name and case number; (b) jurisdiction; (c) major charge; (d) length of trial; (e) judge; (f) opposing counsel; (g) co-counsel and counsel for co-defendants, if any.**

7. **Please list the names and telephone numbers of five professional references (two of whom must be judges).**

Name

Telephone Number

8. **Please indicate whether you have any special qualifications, such as fluency in a foreign language, which you believe the Selection Committee should be aware of in reviewing your application.**

-
9. Please state briefly how you keep yourself current on federal criminal law, including Sentencing Guidelines issues:

-
-
10. Please identify on Exhibit B attached (by name, case number, jurisdiction, judge and opposing counsel) three cases your have handled and succinctly (in 150 words or less) describe critical issues (merits or sentencing) they presented and the resolution thereof.
11. Please indicate the type of felony cases that you are willing to handle.

Length of Trial

- _____ All cases
- _____ Only cases in which estimated length of trial is two weeks or less.

Geographical Location

- _____ All cases
- _____ Northern Division cases only
- _____ Southern Division cases only

I declare under the penalties of perjury that the foregoing answers and statements are true and correct.

(Signature of Applicant)

EXHIBIT A

	Defendant's Last Name and Case Number	Jurisdiction	Primary Charge	Length of trial	Judge	Opposing Counsel	Co-counsel; Counsel for Co-defendant
1.							
2.							
3.							
4.							
5.							

EXHIBIT B

Identifying Information - Case 1

**Defendant's
Last Name:**

Case Number:

Jurisdiction:

Judge:

**Opposing
Counsel:**

Succinct Statement of Issues and Resolution Thereof:

EXHIBIT B

Identifying Information - Case 2

Defendant's

Last Name:

Case Number:

Jurisdiction:

Judge:

Opposing

Counsel:

Succinct Statement of Issues and Resolution Thereof:

EXHIBIT B

Identifying Information - Case 3

Defendant's

Last Name:

Case Number:

Jurisdiction:

Judge:

Opposing

Counsel:

Succinct Statement of Issues and Resolution Thereof: